
**INCUMBENT WORKER TRAINING PROGRAM
APPLICATION**

(Business name as it would appear on contract)

**Utah Department of Workforce Services
Workforce Development and Information Division
Attention: Stephen Maas
140 East 300 South
Salt Lake City, Utah 87111
Phone (801) 526-9363 ♦ Fax (801) 526-9239
jobs.utah.gov**

Incumbent Worker Training Program Guidelines & Application

The Incumbent Worker Training Program (IWTP) is funded by the federal Workforce Investment Act (WIA) and administered by the Utah Department of Workforce Services (DWS). The purposes of the Program are to: 1) provide grants to Utah employers to assist with certain expenses associated with skills upgrade training for their full-time employees, and 2) help those workers gain the skills that keep them employed and increase their wages. The Program enhances workforce and economic development. Training projects funded by the Program may begin no earlier than July 1, and end no later than June 30.

Program Guidelines

Applications for the Utah Incumbent Worker Training Program (IWTP) are open to employers and consortia of employers and partners meeting the guidelines listed below.

Applicants:

- ☐ Must have been in operation in Utah for a minimum of three (3) years prior to the application date in order to be eligible for grant funding.
- ☐ Must request training for at least fifteen (15) full-time employees
- ☐ Must demonstrate financial viability and must be current on all state tax obligations.
- ☐ Must be in one of the Department of Workforce Services designated target industries or occupations.
- ☐ Must pay family sustaining wages for their economic region.
- ☐ Must have defined and accessible career ladders.
- ☐ Must agree to list all job openings with DWS that result from the IWTP.
- ☐ Must provide evidence of a long-term commitment to employee training and that IWTP funds will be used to supplement not supplant existing training efforts.
- ☐ Must provide a 50% financial and/or in-kind match.

Applications will be rated on a 100-point scale based on the following criteria. (An additional 5 bonus points will be awarded to Partnerships that provide a sustainability plan.) The scoring criteria is as follows:

- ☐ Demonstrate that the training plans are based upon knowledge of the industry /occupation. Training plans must be linked to an overall strategy that is designed to enhance the competitive position of the participating partners. Training plans must identify the business and innovation strategy and the way in which the training program supports that strategy and clearly indicate business demand for training and education. Skill gaps must also be identified, along with potential career ladders. (Maximum points: 30)
- ☐ Strength of the partnership, including employer and employee (or employee representation) participation, enhanced coordination between businesses, economic development organizations, organized labor and associations, and history of activities undertaken by the partnership. In addition, applications will be judged by the degree to which projects align and leverage resources and services to enhance the competitive position of the participating partners. (Maximum points: 25)
- ☐ Strength of project design. Project design should support the identified business and innovation strategy and clearly demonstrate an effective and timely training strategy. Applications will be judged based on the degree to which the expected outcomes improve overall business competitiveness, increase business revenues and worker earnings. Projects may also offer educational/training that provides credits or industry recognized credentials. Where possible, links to Utah's institutions of higher learning and community colleges should be demonstrated. (Maximum Points: 30)
- ☐ Budget is reasonable and effectively tied to project goals with evidence of leveraging additional resources. (Maximum points: 15)
- ☐ Bonus points will be awarded to applicant(s) that provide a sustainability plan for the partnership and the training. (Maximum- 5 bonus points.)

Training Services:

- ☐ Can be provided through Utah's public or private educational institutions, private training organizations, trainers employed by the business, or a combination of training providers. Private postsecondary institutions and private training providers may be utilized only upon a review that includes, but is not limited to, accreditation and licensure and prior approval by the Department of Workforce Services.
- ☐ Can be conducted at the employer's place of business, at the training provider's facility, or at a combination of sites.

Reimbursable Training Expenses:

- ☐ Instructors'/trainers' salaries
- ☐ Curriculum development
- ☐ Textbooks/Manuals
- ☐ Assessment, testing or certification fees

- ☐ Trainees' wages

Non-reimbursable Training Expenses:

- ☐ Purchase of capital equipment
- ☐ Purchase of any item or service that may be used outside of the training project
- ☐ Travel expenses of trainees

Grant awards:

- ❑ Businesses approved for funds enter into a contract with the DWS, which commits the business to complete the training project as proposed in their application.
- ❑ Any business approved for an IWTP grant award, that is a recipient or sub recipient of Federal funding of \$300,000 or more in a fiscal year, will be required to furnish an independent financial and compliance audit. The company is responsible for the cost of the audit, and IWTP funds cannot be used to cover these costs.
- ❑ Approved budget items are reimbursed upon presentation of adequate documentation of the training and evidence that the training expense incurred has been paid.
- ❑ Businesses provide a matching contribution to the training project. **Businesses will be required to provide a minimum of 50% of the requested direct training costs, i.e. instructors' wages/tuition, curriculum development and textbooks and manuals.**
- ❑ Business will keep accurate records of the project's implementation process and certify that all information provided for the purpose of requesting reimbursements and reporting training activity is accurate and true.
- ❑ For performance tracking measures, businesses are required to submit specific information for employees participating in training activities which includes, but is not limited to, trainees' names, social security numbers, dates of birth, races, wages, etc.
- ❑ Businesses submit monthly or quarterly reimbursement requests with required support documentation.

Project Completion:

- ❑ With the high demand and limited funding available, all applications will be evaluated to leverage other state, federal and private funds with IWTP funds.
- ❑ All grant projects shall be performance based with specific measurable performance outcomes -- including the completion of the training project and number of employees trained.
- ❑ Final payment for businesses receiving IWTP grants will be withheld until the final report is submitted and all performance criteria specified in the grant have been achieved.
- ❑ Businesses shall provide sufficient documentation to the Department of Workforce Services for identification of all employee participants for calculation of performance measures required by WIA, and any other outcomes deemed pertinent by the grant administrator.
- ❑ **All training must be completed no later than June 30 of the same fiscal year as begun.**

Application Instructions

Detach and complete the attached IWTP application. Any information or documentation that cannot be supplied in the provided space should be identified by the relevant question number and attached to the back of the application form. Submit one original and three (3) copies of the signed completed application to you local Department of Workforce Services, Workforce Development and Information Division, 140 East 300 South in Salt Lake City.

If you have any questions or need assistance in completing the application, please contact **Stephen Maas**, IWT Program Administrator, Department of Workforce Services at 801-526-9363 or email: smaas@utah.gov



State of Utah
Department of Workforce Services
**INCUMBENT WORKER TRAINING
GRANT APPLICATION**

PLEASE RETURN APPLICATIONS TO:

Attn: Workforce Development &
Information Division
140 E 300 S
Salt Lake City, Utah 85115

I. BACKGROUND INFORMATION				
Applicant (Company Name)		FEIN Number	Unemployment Insurance Number	
Site Street Address				
City		County	State	Zip
Type of Business or Industry		Union/Local/Contact Person/Phone Number (if applicable)		
Parent Company Names(s)			SIC Code	
Parent Company Address(es)				
City		State/County	Zip	Phone #
Primary Company Contact(s)		Title		
Phone Number	FAX Number		e-mail Address	
II. PROJECT OUTCOMES				
Total number of people to be trained: _____				
Total number of Credentials issued: _____				
Credential Type		Projected Number of Credentials		
Apprenticeship		<input type="checkbox"/> _____		
Associate Degree/Other College Degree		<input type="checkbox"/> _____		
Certificate of Technical Achievement (CTA)		<input type="checkbox"/> _____		
Journey Level Upgrade		<input type="checkbox"/> _____		
Other Customized Certification		<input type="checkbox"/> _____		
(Specify :) _____				
III. EMPLOYMENT AND WAGES				
Current total level of employment for sites(s) _____				
Level of employment one year ago _____				
Average hourly wages of employees (without fringe benefits)				
Professional/Managerial		\$ _____		
Skilled Trades		\$ _____		
Semi-skilled/Production/Administrative		\$ _____		
Total annual payroll for business location		\$ _____		

IV. PROJECT DESCRIPTION			
Please attach a project description which includes the following: <ul style="list-style-type: none"> ▪ A brief description about the company and product or services performed. ▪ The reasons the training is needed and how the project will be implemented ▪ A brief description of how the training will benefit the company including business outcomes anticipated from this grant, how they will be measured, and how the credentials selected improve the productivity, competitiveness and/or quality of products and services. (Planned credentials must be quantified.) ▪ A brief description of how the training will benefit the employees including career paths for employees who successfully complete the training and plans and practices that foster lifelong learning among workers. ▪ Current investment in training of incumbent workers. ▪ Approximate start and end date of training. 			
V. BUDGET DETAILS			
Please complete the budget summary and the attached training budget detail form. Also provide a budget narrative that explains how the costs were determined. <i>Please note: the budget should only include information for the project for which the funding is being requested.</i>			
PROJECT BUDGET SUMMARY			
	Match Funds	Training Funds Requested	Internal Use Only Amount Awarded
1. Personnel			
a. Salaries & Wages	\$	\$	\$
b. Fringe Benefits			
c. Consultant/Contract Services			
d. Tuition			
Sub Total			
2. Non-Personnel			
a. Rental, Lease or Purchases of Equipment	\$	\$	\$
b. Supplies for Training			
c. Travel			
d. Books/Lab Fees			
e. Other			
Sub Total			
Total			
3. Current company annual training budget	\$		
4. Other training funds received			
Source _____	Date Received _____	Amt of Award	\$
Source _____	Date Received _____	Amt of Award	\$
All grantees must submit quarterly program reports that describe progress toward meeting the desired outcomes. Additional information required will include: the total number of trainees enrolled; name, date of birth, gender, social security number, address, education of each enrolled trainee, date of hire, entry and exit wage; outcomes; credentials achieved; and retention of enrollees during the grant period.			
VI. EVALUATION		VII. RETURN ON INVESTMENT STUDY	
Please indicate participation in a customer-service evaluation. <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div>		Please indicate participation in a return on investment study. <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div>	

NOTE OF CONFIDENTIALITY OF INFORMATION

To the extent feasible and permissible by law, the Utah Department of Workforce Services (DWS) will honor an applicant's request that confidential information submitted to DWS will remain confidential. DWS will treat the information confidential only if: (i) the information is in fact protected confidential information such as trade secrets or privileged or confidential commercial or financial information, (ii) the information is specifically marked and identified as confidential by the applicant, (iii) the information is segregated and placed in a separate appendix to the application, and (iv) no disclosure of the information is required by law or judicial order. If the application results in a grant or loan, the honoring of the confidentiality of identified data shall not limit DWS' right to disclose the details and results of the economic development project to the public.

MANAGEMENT CERTIFICATION

I hereby certify that I have read the foregoing project file and that the information contained herein is true and accurate to the best of my knowledge and belief. Furthermore, to the best of my knowledge and belief, our company and/or organization does not have any outstanding liabilities with the State of Utah, including but not limited to the Department of Workforce Services, Unemployment Insurance Contribution Division, nor are we currently involved in any labor disputes.

APPLICANT AUTHORIZATION

Name	Title (CEO or highest ranking applicant official)	Date
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Equal Opportunity Employer Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711. Spanish Relay Utah: 1-888-346-3162.

Incumbent Worker Training Grant Training Budget Detail

Applicant: _____

Type of Training:		Start Date	End Date			
Training Start & End Date:						
Training Provider and Address:						
2 nd Training Provider and Address:						
Credentia Resulting from Training:						
Credentia Provider:						

Training Costs*	DESCRIPTION OF ITEMS OR SERVICE INCURRING COST	FUNDING SOURCE	COST PER STUDENT	NUMBER OF STUDENTS	TOTAL COSTS
Salaries and wages of students while in training					
Fringe benefits of students while in training					
Supplies for training					
Books/lab fees for training					
Consultant services and contract services					
Tuition					
Equipment					
Travel					
Other -- Describe					
* If necessary please use extra sheets.	Grant's Average Cost Per Student	Grand Total's Average Cost per Student		Grand Total	\$